

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 8, 2004

Application or Docket Number

*10/580234*

**CLAIMS AS FILED - PART I**

|                                  | (Column 1)  | (Column 2)                             |
|----------------------------------|---|--|
| U.S. NATIONAL STAGE FEES         |   |  |
| BASIC FEE                        | SMALL ENT. = \$ 150   | LARGE ENT. = \$ 300                    |
| EXAMINATION FEE                  | Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100                      | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE                       | U.S. Is ISA = \$ 50 / \$ 100<br>ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS.         | minus 100 =   | / 50 =                                 |
| TOTAL CHARGEABLE CLAIMS          | <i>40</i> minus 20 =  | <i>20</i>                              |
| INDEPENDENT CLAIMS               | <i>7</i> minus 3 =  | <i>4</i>                               |
| MULTIPLE DEPENDENT CLAIM PRESENT |   | <input type="checkbox"/>               |

\* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY<br>TYPE | OTHER THAN<br>SMALL ENTITY |
|----------------------|----------------------------|
| RATE                 | FEE                        |
| BASIC FEE            | <input type="checkbox"/>   |
| EXAM. FEE            | <input type="checkbox"/>   |
| SEARCH FEE           | <input type="checkbox"/>   |
| X \$ 125 =           | <input type="checkbox"/>   |
| X \$ 25 =            | <input type="checkbox"/>   |
| X \$ 100 =           | <input type="checkbox"/>   |
| + \$ 180 =           | <input type="checkbox"/>   |
| TOTAL                | <input type="checkbox"/>   |
| RATE                 | FEE                        |
| BASIC FEE            | <i>300</i>                 |
| EXAM. FEE            | <i>20</i>                  |
| SEARCH FEE           | <i>400</i>                 |
| X \$ 250 =           | <input type="checkbox"/>   |
| X \$ 50 =            | <input type="checkbox"/>   |
| X \$ 200 =           | <input type="checkbox"/>   |
| + \$ 360 =           | <input type="checkbox"/>   |
| TOTAL                | <i>2700</i>                |

**CLAIMS AS AMENDED - PART II**

|  | (Column 1)     | (Column 2)                                | (Column 3)                                  |
|--|----------------|---|---|
| AMENDMENT A:                                   | <i>5-22-06</i> | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |
| Total  | * <i>40</i>    | Minus                                     | ** <i>40</i> = <i>—</i>                     |
| Independent                                    | * <i>7</i>     | Minus                                     | *** <i>7</i> = <i>—</i>                     |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                |   | <input type="checkbox"/>                    |

| SMALL ENTITY        | OTHER THAN<br>SMALL ENTITY |
|---------------------|----------------------------|
| RATE                | ADDITIONAL<br>FEE          |
| X \$ 25 =           | <input type="checkbox"/>   |
| X \$ 100 =          | <input type="checkbox"/>   |
| + \$ 180 =          | <input type="checkbox"/>   |
| TOTAL ADDIT.<br>FEE | <input type="checkbox"/>   |
| RATE                | ADDITIONAL<br>FEE          |
| X \$ 50 =           | <input type="checkbox"/>   |
| X \$ 200 =          | <input type="checkbox"/>   |
| + \$ 360 =          | <input type="checkbox"/>   |
| TOTAL ADDIT.<br>FEE | <input type="checkbox"/>   |

|  | (Column 1)                                | (Column 2)                                  | (Column 3)               |
|--|---|---|--------------------------|
| AMENDMENT B:                                   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
| Total  | * <i>—</i>                                | Minus                                       | ** <i>—</i> = <i>—</i>   |
| Independent                                    | * <i>—</i>                                | Minus                                       | *** <i>—</i> = <i>—</i>  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/> |

|                     |                          |
|---------------------|--------------------------|
| RATE                | ADDITIONAL<br>FEE        |
| X \$ 25 =           | <input type="checkbox"/> |
| X \$ 100 =          | <input type="checkbox"/> |
| + \$ 180 =          | <input type="checkbox"/> |
| TOTAL ADDIT.<br>FEE | <input type="checkbox"/> |
| RATE                | ADDITIONAL<br>FEE        |
| X \$ 50 =           | <input type="checkbox"/> |
| X \$ 200 =          | <input type="checkbox"/> |
| + \$ 360 =          | <input type="checkbox"/> |
| TOTAL ADDIT.<br>FEE | <input type="checkbox"/> |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.